

# TRANSMITTAL FORM

Attorney Docket No.

BC9-99-047

1455P

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In re the application Jose BRUNHEROTO, et al.

Confirmation No: 9149

AUG 16 2004

Serial No: 09/602,278

Group Art Unit: 2611

Technology Center 2600

Filed: June 23, 2000

Examiner: Saltarelli, Dominic D.

For: Method and System for Automated Monitoring of Quality of Service of Digital Video Material Distribution and Play-Out

## ENCLOSURES (check all that apply)

|                                     |  |  |  |                                     |   |
|-------------------------------------|--|--|--|-------------------------------------|---|
| <input checked="" type="checkbox"/> | Amendment/Reply  | <input type="checkbox"/>   | Assignment and Recordation Cover Sheet           | <input type="checkbox"/>            | After Allowance Communication to Group                            |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> After Final              | <input type="checkbox"/>   | Part B-Issue Fee Transmittal                     | <input type="checkbox"/>            | Appeal Communication to Board of Appeals and Interferences        |
| <input type="checkbox"/>            | Information disclosure statement                             | <input type="checkbox"/>   | Letter to Draftsman                              | <input type="checkbox"/>            | Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/>            | <input type="checkbox"/> Form 1449                           | <input type="checkbox"/>   | Drawings   | <input type="checkbox"/>            | Status Letter   |
| <input type="checkbox"/>            | <input type="checkbox"/> (X) Copies of References            | <input type="checkbox"/>   | Petition   | <input checked="" type="checkbox"/> | Postcard  |
| <input type="checkbox"/>            | Extension of Time Request *                                  | <input type="checkbox"/>   | Fee Address Indication Form                      | <input type="checkbox"/>            | Other Enclosure(s) (please identify below):                       |
| <input type="checkbox"/>            | Express Abandonment  | <input type="checkbox"/>   | Terminal Disclaimer                              |                                     |   |
| <input type="checkbox"/>            | Certified Copy of Priority Doc                               | <input type="checkbox"/>   | Power of Attorney and Revocation of Prior Powers |                                     |   |
| <input type="checkbox"/>            | Response to Incomplete Appln                                 | <input type="checkbox"/>   | Change of Correspondence Address                 |                                     |   |
| <input type="checkbox"/>            | Response to Missing Parts                                    | *Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxx month(s), from to . |  |                                     |   |
| <input type="checkbox"/>            | <input type="checkbox"/> Executed Declaration by Inventor(s) |  |  |                                     |   |

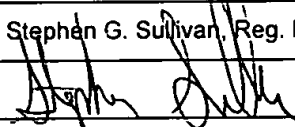
## CLAIMS

| FOR                | Claims Remaining After Amendment | Highest # of Claims Previously Paid For | Extra Claims | RATE    | FEE     |
|--------------------|----------------------------------|---|--------------|---------|---------|
| Total Claims       | 27                               | 29                                      | 0            | \$18.00 | \$ 0.00 |
| Independent Claims | 3                                | 3                                       | 0            | \$86.00 | \$ 0.00 |
| Total Fees         |                                  |   |              |         | \$ 0.00 |

## METHOD OF PAYMENT

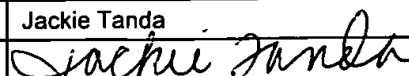
|                                     |  |
|-------------------------------------|--|
| <input type="checkbox"/>            | Check no. _____ in the amount of \$ _____ is enclosed for payment of fees.                 |
| <input checked="" type="checkbox"/> | Charge any fees or credit any overpayment to Deposit Account No. 09-0460 (IBM Corporation) |

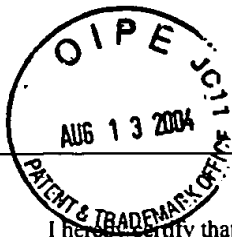
## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|               |   |
|---------------|---|
| Attorney Name | Stephen G. Sullivan, Reg. No. 38,329  |
| Signature     |  |
| Date          | August 9, 2004  |

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: August 9, 2004

|                      |   |
|----------------------|---|
| Type or printed name | Jackie Tanda  |
| Signature            |  |



CERTIFICATE OF MAIL

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on August 9, 2004.

*Jackie Tanda*  
Jackie Tanda

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Date: August 9, 2004

Jose BRUNHEROTO, et al.

Confirmation No: 9149

Serial No: 09/602,278

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Examiner: Saltarelli, D.

For: METHOD AND SYSTEM FOR AUTOMATED MONITORING OF QUALITY  
SERVICE OF DIGITAL VIDEO MATERIAL DISTRIBUTION AND PLAY-OUT

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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AMENDMENT

Sir:

In response to the Final Office Action dated June 7, 2004, please amend the above-identified application in the following manner:

**The Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 8 of this paper.